BRITISH CARDIAC SOCIETY NEWSLETTER

The newsletter this month is principally about meetings planned by the British Cardiac Society. To encourage members to support the European Society of Cardiology we decided that we should have only one major meeting a year. We believe this was the correct decision but the reduction in our own activities left a void that we have failed so far to fill. We have a suggestion that is relatively minor but it may answer a need. We will try a cautious pilot scheme, and develop the idea if it proves popular. In the meantime we welcome your views.

Our suggestion is for small meetings at the British Cardiac Society for approximately 20 members, selected on a first apply first accepted principle. The meetings will cover topics that should be of general interest to cardiologists yet are outside the expertise of most of us-and without some help likely to remain so. They will be led by an expert, but will be interactive with the lively audience participation that should easily be generated within a small group. The first meeting will be at 10 am on Tuesday 18 February 1992 on the topic of molecular biology with particular reference to our specialty. The second, which is planned for 10 am on 9 June, is entitled "New Concepts in the Pathophysiology of Atheroma". Details will be announced in due course. The meetings will be quite different from the excellent workshops held by the British Heart Foundation that are attended by experts with a common interest. Our meetings will assume little prior knowledge and will be designed to offer an introduction to the subject (and whet the appetite for more). The late start should enable members remote from London to attend. Those who live and work a long way from the capital are at a disadvantage in terms of easy access for many meetings, to say nothing of expense. Would it be fair to subsidise travel for those who have far to come? This has not been agreed but if members favoured the idea we could consider it. No charge would be made for the meetings of course. If you wish to attend either of the first two meetings you may feel you should apply at once—we would be delighted if there were a rush . . . If the idea should prove to be popular the seminars could become regular events, one in each month that had no major American or European meeting—perhaps eight a year. Do please give us your views on all these various points.

We are planning two special meetings this year. The first, by invitation only, is on 29 November and is for representatives of our affiliated groups: BCIS (interventionalists), BPEG (electrophysiologists), BNCG (nuclear cardiologists), BSE (echocardiographers), and BPCA (paediatric cardiologists). We have never defined what we mean by an affiliated group. We wish to know what the groups wish affiliation to mean and what they want the society to do for them. We need to determine how far the society should seek to have an influence on matters of common interest-for example the reports that are issued from time to time by the groups. The Association of British Cardiac Nurses also seeks affiliation but before this matter is discussed further we believe it is wise to consider further the meaning of affiliation.

The second meeting is planned for 4 December. This will be for a restricted number of members, perhaps 50 in all, again on a first apply first accepted principle. It will address matters relating to the development of the internal market in the National Health Service. John Parker has drawn attention to the need for the meeting, and has undertaken to supervise the arrangements. Cardiology and cardiac surgery face many special problems as average specialty cost contracts evolve to individual procedure and diagnostic costs. These difficulties are complicated by the extensive cross referral between districts in our specialties. Other issues to be considered will include the identification and funding of research activity in both district general hospitals and regional centres. It is hoped that the participants will include representatives from the Department of Health, the National Health Service Management Executive, and a health economist, as well as representatives from the provider and purchaser side, including a regional director of public health. Please let us know if you wish to attend.

Finally news of a meeting of the British Nuclear Cardiology Group, to be held in association with the British Institute of Radiology. The title is "Ischaemic Heart Disease: Limitations of Non-invasive Assessment", the venue is the Bearstead Lecture Theatre at The Royal London Hospital (10.30 am to 4.30 pm on Friday 22 November). Stuart Cobbe will present the general possibilities for assessment and risk stratification. Other speakers will discuss the advantages and limitations of a wide range of specific techniques from the familiar-electrocardiography, echocardiography, perfusion imaging, and blood pool imaging-to the more novel such as nuclear magnetic resonance and fast computed tomography. Debate between the experts and the audience will be encouraged—indeed stimulated—by Martin Rothman. The registration fee is £10 (£5 for technicians). More information on what should prove to be a lively occasion can be obtained from Ann Tweddel at Glasgow Royal Infirmary (041 552 3535 ext 5362).

Several important reports are due to appear in the next few months. These include the Sixth Biennial Survey of Staffing in Cardiology, which will appear in the next issue of the journal. This will highlight potential problems in staffing for the coming years: as data are available problems should be avoided, but first they have to be understood and accepted. We hope they will be. Accurate and recent data are so important to us in our frequent debates over staffing and training that we are now to conduct surveys annually instead of biennially. Bear with us. We need the information for the good of the specialty, our units, and of course our patients. There is also a report from BCIS to appear in the British Heart Journal and one from a working party on cardiological services for the elderly to appear in the Journal of the Royal College of Physicians. The BPEG recommendations for pacemaker prescription for symptomatic brachycardia appeared in the August issue of the British Heart Journal. The Fourth Report of a Joint Cardiology Committee of the Royal College of Physicians of London and the Royal College of Surgeons of England on the provision of services for the diagnosis and treatment of heart disease should appear early next year.

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NOTICES

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The Annual Meeting of the **British Cardiac** Society will take place at the Harrogate International Centre on 26 to 29 May. The closing date for receipt of abstracts is 3 January 1992.

The Vth World Congress of Cardiac Rehabilitation, organised by the Scientific Council of the Section on Cardiac Rehabilitation of the International Society and Federation of Cardiology, will take place in Bordeaux on 5 to 8 July: BCS, Palais des Congrès de Bordeaux, 33300 Bordeaux-Lac, France (Fax: (+33) 56 43 17 76; Tel: (+33) 56 50 84 49).